## **Combined Request and Decision form for**

## **Wage Determination**

Request made by				
Name of person				
Title				
Department, Agency, or Bureau				
Address, phone, fax				
Date of request		Date of Advertisement	Supercedes Decision	

If Work is in multiple building rates regions, then a separate request is required for each region; and, if in multiple counties within a region, then all counties within each region must be listed.

The Project					
City	State	County			
Project Identification					
SBC Project No.					
Brief Project Description					

## **Decision rendered by**

State of Tennessee
Dept. of Labor and Workforce Development
Labor Standards Division
404 James Robertson Parkway, Suite 1606
Nashville, Tennessee 37243-0657

Wage Determination				
Decision Number	T-			
Building R	ates	Apply Do not apply		
Highway R	ates	Apply Do not apply		
Report to				
Date assigned	Assigned by			

The project identification and brief project description given herein shall not act to define, expand, or limit the Work required by the Contract Documents. Such information provided herein is intended only as information to the Department of Labor and Workforce Development. No other use or interpretation is intended.